As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION

(METHOD AND APPARATUS FOR	RFINGERPRINT	DETECTION	
specification of which (check only one item below):			
☐ is attached hereto, and was amended on		(if applicable).	
was filed as United States application number	on /	on April 20, 2005	
and was amended on	(if applicable).		
was filed as PCT international application number	er	on	
and was amended on	(if applicable).		

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §§119 (a)-(d), 172 or 365 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (MM/DD/YYYY)	PRIORITY CLAIMED UNI 35 U.S.C. §§119, 172 or
WIPO	PCT/US2003/033145	10-21-2003	¥Yes □No
US	60/419,567	10-21-2002	¥ Yes □ No
			☐ Yes ☐ No
			☐ Yes ☐ No
			☐Yes ☐No
			☐ Yes ☐ No
			☐ Yes ☐ No
			☐ Yes ☐ No



Application No. <u>Unassigned</u>
Attorney Docket No. <u>Unassigned</u>
033018-109

I hereby appoint the following attorneys and agents to prosecute said application and to transact all business in the Patent and Trademark Office connected therewith and to file, prosecute and to transact all business in

in the Patent and Trademark Office connection with international applic Clinton H. Hallman, Jr., R/N 38,486	cations directed to said	invention:	
Address all correspondence to:	Burns, Doane, Swecker & Mathis, L.L.P. Customer Number 2 1 8 3 9 P.O. Box 1404 Alexandria, Virginia 22313-1404		
Address all telephone calls to: Pet	er K. Skiff		at (703) 836-6620.
I hereby declare that all statements on information and belief are believ knowledge that willful false statement under Section 1001 of Title 18 of the the validity of the application or an	ved to be true; and furth ents and the like so ma ne United States Code a	er that these statement de are punishable by fin and that such willful fals	s were made with the see or imprisonment, or both,
NAME OF SOLE OR FIRST INVE	NTOR		
GIVEN NAME (first and middle (if any)) Walter A.		FAMILY NAME OR SURNAME Nichols	
INVENTOR'S SIGNATURE	A. Muchol		DATE 5-/31/05
RESIDENCE (City, State & Country) Chesterfield, VA USA			CITIZENSHIP USA
MAILING ADDRESS (Complete Street A 9608 Summercliff Court, Chesterfield,		e, Zip & Country)	
NAME OF SECOND INVENTOR			
GIVEN NAME (first and middle (if any)) Qaniel	FAMILY NAME OR SURNAME Diefenbach		
INVENTOR'S SIGNATURE	luer		DATE 5/31/05
RESIDENCE (City, State & Constry) Richmond, VA USA			CITIZENSHIP
MAILING ADDRESS (Complete Street A 8661 Pleasant Ridge Road, Richmond		e, Zip & Country)	
NAME OF THIRD INVENTOR			
GIVEN NAME (first and middle (if any))		FAMILY NAME OR SURNA	AME
INVENTOR'S SIGNATURE		1	DATE
RESIDENCE (City, State & Country)			CITIZENSHIP
MAILING ADDRESS (Complete Street A	dd-oos including City Ctot	7in 9 Country	

